353742

FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response.....16.00



			_ 000270.0
Name of Offering ( chec	k if this is an amendment and name has changed, and in-	dicate change.)	
Limited Partnership Inter	rests in Pacific Equity Partners Supplementary Fund	III, L.P.	
Filing Under (Check box(es	s) that apply):  Rule 504 Rule 505 Rule 506	☐ Section 4(6) ☐ ULOE	
Type of Filing New Fil	ing Amendment		
	A. BASIC IDENT	TIFICATION DATA	
1. Enter the information re-	quested about the issuer		
Name of Issuer ( check i	f this is an amendment and name has changed, and indic	ate change.)	
	upplementary Fund III, L.P.		
Address of Executive Offic	es (Number and Street, City, State, Zip Code)	Telephone Number (in	cluding Area Code)
26 New Street		+44-1534-814-814	
St. Helier, Jersey, JE2 3R	A		
	ess Operations (Number and Street, City, State, Zip Cod	e) Telephone Number (in	cluding Area Code)
(if different from Executive			
Brief Description of Busine			
Private equity investment	fund		PROCECTO
Type of Business Organiza	tion		
corporation	☐limited partnership, already formed	other (please specify):	/ FEB 2 2 2006
☐ business trust	☐limited partnership, to be formed		L Turn
Actual or Estimated Date o	f Incorporation or Organization:  Month Yea  1 2 0	r 5 ⊠ Actual □ Estimated	FINANCIAL
Jurisdiction of Incorporatio	n or Organization: (Enter two-letter U.S. Postal Service	abbreviation for State:	
	CN for Canada; FN for other	er foreign jurisdiction) DE	

## **GENERAL INSTRUCTIONS**

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; X Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and X Each general and managing partner of partnership issuers. ☐ Executive Officer General and/or Managing Partner Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Director Full Name (Last name first, if individual) Pacific Equity Partners Fund III GP (Jersey) Limited Business or Residence Address (Number and Street, City, State, Zip Code) 26 New Street, St. Helier, Jersey, JE2 3RA ☐ Executive Officer Check Box(es) that Apply: Promoter Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Newbald, Peter E. Business or Residence Address (Number and Street, City, State, Zip Code) 26 New Street, St. Helier, Jersey, JE2 3RA Check Box(es) that Apply: ☐Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Haithwaite, Deryk A. Business or Residence Address (Number and Street, City, State, Zip Code) 26 New Street, St. Helier, Jersey, JE2 3RA Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Pillar, Simon D. Business or Residence Address (Number and Street, City, State, Zip Code) Level 36 Chifley Tower, 2 Chifley Square, Sydney NSW 2000, Australia Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Richardson, Michael Business or Residence Address (Number and Street, City, State, Zip Code) 26 New Street, St. Helier, Jersey, JE2 3RA Check Box(es) that Apply: ☐Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter ■ Beneficial Owner □ Executive Officer □ Director ☐ General and/or Managing Partner Check Box(es) that Apply: Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Executive Officer Check Box(es) that Apply: □Promoter ☐ Beneficial Owner ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: □ Promoter ☐ Director General and/or Managing Partner Full Name (Last name first, if individual)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Business or Residence Address (Number and Street, City, State, Zip Code)

					B. INFO	RMATIO	N ABOU	T OFFER	UNG			·-··		
1. Has t	the issuer sol	d, or does t	he issuer in	tend to sell,	to non-acc	redited inve	estors in thi	s offering?.					Yes	No ⊠
				A	Answer also	in Append	lix, Column	2, if filing	under ULO	E.				
2. Wha	t is the minin	num investi	ment that w	ill be accep	ted from an	ıy individua	al? *Subjec	t to the dis	cretion of t	he Genera	l Partner		\$ 3,789,	390.79*
3. Does	the offering	permit join	ıt ownership	of a single	unit?				************	**************	,	********	Yes	No
				_										$\boxtimes$
remu perso five only		solicitation f a broker o o be listed a	of purchase r dealer reg re associate	ers in conne istered with	ection with a the SEC a	sales of sec nd/or with a	urities in that state or state	e offering. ates, list the	If a person name of th	to be listed e broker or	is an assoc dealer. If r	iated nore than		
Full Name ( N/A	Last name fi	rst, if indiv	idual)											
Business or	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip (	Code)								
Name of As	sociated Bro	ker or Deal	er						<del></del>		<del></del>	<del></del>		
States in W	hich Person I	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers								
(Chec	k "All States	or check i	ndividual S	tates)		•••••					All States			
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] _[WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [ <u>W</u> Y]	[ID] [MO] [PA] [PR]		
Full Name (	(Last name fi	rst, if indiv	idual)											_
Business or	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)								
Name of As	sociated Bro	ker or Deal	er											
States in W	hich Person I	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers							·	
(Check "All	l States" or cl	heck individ	dual States)								All States			
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Name (	Last name fi	rst, if indiv	idual)											
Business or	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)								
Name of As	ssociated Bro	ker or Deal	er	<u></u>										
States in W	hich Person I	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers								
(Check "All	l States" or cl	heck individ	dual States)	,		.,,			•		All States			
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID) [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	s
	Partnership Interests	\$ 321,729,861.98*	\$ 180,490,453.33*
	Other (Specify)	\$	\$
	Total	\$ 321,729,861.98*	\$ 180,490,453.33*
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	26	\$ 180,490,453.33*
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		· · · · · · · · · · · · · · · · · · ·
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	$\boxtimes$	\$ 100,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		S
	Total		\$ 100,000

<sup>\*</sup> Converted to US dollars from Australian dollars.

_	C. OFFERING PRICE, NUM	MBER OF INVESTORS, EXPENSES AND U	SE OF PROCEEDS		
١.	b. Enter the difference between the aggregate offering price expenses furnished in response to Part C - Question 4.a. T issuer."				
	issuer."			\$ 321,629,861.98*	
5.	Indicate below the amount of the adjusted gross proceeds the purposes shown. If the amount for any purpose is not left of the estimate. The total of the payments listed must deforth in response to Part C - Question 4.b. above.	known, furnish an estimate and check the box to	the		
			Payments to Officers, Directors, & Affiliates	Payments To Others	
	Salaries and fees		<b>S</b>	□ s	
	Purchase of real estate		\$	□s	
	Purchase, rental or leasing and installation of machinery ar	d equipment	s	□ \$	
	Construction or leasing of plant buildings and facilities		S	□ \$	
	Acquisition of other businesses (including the value of sec offering that may be used in exchange for the assets or sec pursuant to a merger)	\$	□s		
	Repayment of indebtedness		s	□ s	
	Working capital		s	□ <b>s</b>	
	Other (specify): Investments in securities and expenses	□ s	⊠\$ 321,629,861.98		
	Column Totals		S	⊠\$ 321,629,861.98	
	Total Payments Listed (column totals added)	otal Payments Listed (column totals added)			
-	<del></del>	D. FEDERAL SIGNATURE			
	ssuer has duly caused this notice to be signed by the unders	igned duly authorized person. If this notice is fil			
	ndertaking by the issuer to furnish to the U.S. Securities and accredited investor pursuant to paragraph (b)(2) of Rule 502		its staff, the information furnis	hed by the issuer to a	
ssi	uer (Print or Type)  Ciffic Equity Partners Supplementary Fund  L.P.		Date February 7, 2006		
		f Signer (Print or Type) or of the General Partner of the Issuer		· · · · · · · · · · · · · · · · · · ·	

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

# ATTENTION

<sup>\*</sup> Converted to US dollars from Australian dollars.